



UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF ILLINOIS
prisoner.esl@ilsd.uscourts.gov

ELECTRONIC FILING COVER SHEET

Please complete this form and include it when submitting any type of document, letter, pleading, etc. to the U.S. District Court for the Southern District of Illinois for review and filing.

Bailey, Jordan
Name

Y31943
ID Number

Please answer questions as thoroughly as possible and circle yes or no where indicated.

1. Is this a new civil rights complaint or habeas corpus petition? Yes or No

If this is a habeas case, please circle the related statute: 28 U.S.C. 2241 or 28 U.S.C. 2254

2. Is this an Amended Complaint or an Amended Habeas Petition? Yes or No

If yes, please list case number: _____

If yes, but you do not know the case number mark here: _____

3. Should this document be filed in a pending case? Yes or No

If yes, please list case number: _____

If yes, but you do not know the case number mark here: _____

4. Please list the total number of pages being transmitted: 14

5. If multiple documents, please identify each document and the number of pages for each document. For example: Motion to Proceed In Forma Pauperis, 6 pages; Complaint, 28 pages.

Name of Document

Number of Pages

Civil Rights Complaint

14

Please note that discovery requests and responses are NOT to be filed, and should be forwarded to the attorney(s) of record. Discovery materials sent to the Court will be returned unfiled.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

UNITED STATES DISTRICT COURT
~~Southern District of Illinois~~
Southern

Jordan Bailey

SCANNED at MENARD and E-mailed
11/27/24 by JA 14 pages
Date initials No.

(Enter above the full name
of the plaintiff or plaintiffs in
this action)

vs.

Case No: 24-2552-SMY

(To be supplied by the Clerk of this Court)

John Doe (Correctional Officer) #1

Jane Doe (H.C.U. Scheduler)

Nurse Nicole

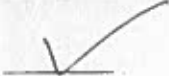
Nurse Practitioner Crane

Nurse Practitioner Mike Holdenbauer

John Doe (Correctional Officer) #2 Sanitation Officer

(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")

CHECK ONE ONLY:



COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983
U.S. Code (state, county, or municipal defendants)

☐

COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE
28 SECTION 1331 U.S. Code (federal defendants)

☐

OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

I. Plaintiff(s):

- A. Name: Jordan Bailey
- B. List all aliases: _____
- C. Prisoner identification number: 431943
- D. Place of present confinement: Merned CC
- E. Address: 700 Kaskasua Road, Merned, TX 76259

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In **A** below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in **B** and **C**.)

- A. Defendant: John Doe #1
 Title: Correctional Officer
 Place of Employment: IDOC Merned CC
- B. Defendant: Jane Doe
 Title: Healthcare Unit Scheduler
 Place of Employment: IDOC Merned CC
- C. Defendant: Nurse Nicole
 Title: Registered Nurse
 Place of Employment: IDOC Merned CC

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

Defendant: Nurse Practitioner Cecine

title: Nurse Practitioner

Place of Employment: IDoc Hernand C.C.

Defendant: Mike Oldenhouse

title: Nurse Practitioner

Place of Employment: IDoc Hernand C.C.

Defendant: John Doe #2 (Correctional Officer) Sanitation Officer

title: Correctional Officer

Place of Employment: IDoc Hernand C.C.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

- A. Name of case and docket number: _____
- B. Approximate date of filing lawsuit: _____
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: _____
- D. List all defendants: N/A
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): _____
- F. Name of judge to whom case was assigned: N/A
- G. Basic claim made: N/A
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): _____
- I. Approximate date of disposition: _____

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

- 1) On September 14th, 2023 plaintiff was housed at Menard C.C.
- 2) Plaintiff was residing in the East cell house.
- 3) The East cell house is infested with bugs such as Cock Roaches, Ants, and Spiders.
- 4) On September 14th, 2023 plaintiff awoke with a device on his ankle.
- 5) Plaintiff could barely stand on his own. His cellmate had to assist him with using the toilet.
- 6) Plaintiff was scheduled to have a video visit but couldn't attend due to the device on his ankle.
- 7) Plaintiff's gallery officer who is defendant John Doe failed to do his 30 minute gallery check.
- 8) Later on that day when the defendant John Doe finally came on the gallery, plaintiff informed him of the device and how his ^{leg} ~~ankle~~ was swelling.
- 9) Defendant John Doe told the plaintiff he didn't feel like filling out paperwork so his issue would have to wait until the next shift.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

- 10) Defendant John Doe^{#1} informed the plaintiff the only paper he was doing that day was a disciplinary Report if the plaintiff continued to cause a scene over a "tiny" injury.
- 11) Later on that day plaintiff saw Defendant Nurse Nicole during Med pass.
- 12) Defendant John Doe^{#1} was escorting Defendant Nurse Nicole thru med pass.
- 13) Plaintiff showed Defendant Nurse Nicole his leg/ankle and she responded "its nothing lay down".
- 14) Plaintiff had to complain to the cellhouse Lieutenant to get medical attention for his ankle.
- 15) Plaintiff was seen by Defendant Nurse Nicole again and she responded "if it wasn't for the white shirt, I'll have you in your cell".
- 16) Once plaintiff was wheel-chaired to the facility's health care unit, he was examined by defendant Nurse Practitioner Mike Hordenbauer.
- 17) Plaintiff explained to defendant Hordenbauer he believed he was bit by something while he was asleep.
- 18) Defendant Hordenbauer told the plaintiff that a bite would not leave his ankle looking like a golf ball.

- 19) Defendant Moldenhauer diagnosed the ^{Plaintiff} ~~defendant~~ with ^{A Blood clot} ~~Cut~~. And ordered the plaintiff to be sent out to the Emergency Room.
- 20) Once sent to the Emergency Room those officers were under the impression that the plaintiff had Gout, and perceived the plaintiff with Todd Fleithman and Released him.
- 21) Over the days plaintiff condition began to worsen.
- 22) Plaintiff Ankle grew to the size of a baseball.
- 24) Plaintiff couldn't leave or attend any of his mail passes.
- 25) Plaintiff advised his gallery officer defendant John Doe that his Ankle was causing him extreme pain.
- 26) Defendant John Doe ignored the plaintiff Request for medical attention.
- 27) Plaintiff was trying to Get the attention of the medical staff including defendant Nurse Nicole, but was told to put in for sick call and would be seen when they get around to it.
- 28) Finally days later plaintiff convinced defendant Nurse Nicole to look at his Ankle again.
- 29) On September 29th, 2023 plaintiff was wheelchaired to the Health Care Unit.
- 30) Plaintiff was seen again by defendant Moldenhauer.
- 31) Defendant Moldenhauer ~~peruse~~ assessed the plaintiff's Ankle and described it as an infection.
- 32) Defendant Gave the plaintiff a Gauze and band-aids and instructed the plaintiff to change his own dressings and he would Reschedule him later.
- 33) Plaintiff was sent back to his cell without any pain meds.
- 33) Plaintiff was in extreme pain in the oncoming days.
- 34) Plaintiff was not followed up with by the defendant Moldenhauer.

- 35) Plaintiff Situation began to worsen.
- 36) Plaintiff was vomiting and couldn't eat.
- 37) Defendant Nurse Practitioner Ceane was notified of the plaintiff's situation when she conducted Medline/Six call in the East cell house.
- 38) Defendant Nurse Practitioner Ceane refused to see the plaintiff because she had a list of inmates to see that day.
- 39) On October 4th, 2023 plaintiff was finally seen by defendant N.P. Ceane who assessed the plaintiff of having Gang Green / infection.
- 40) Plaintiff was sent to St. Louis University hospital because his ankle and calf muscle were swollen and he couldn't walk.
- 41) The physicians at St. Louis University hospital diagnosed the plaintiff of having a soft skin infection.
- 42) The soft skin infection was caused by a bite from a venomous spider called "Brown Recluse".
- 43) Plaintiff was advised that he never had Gout.
- 44) Plaintiff was advised that had he been treated earlier he could've avoided the pain and possibly future damage to his leg.
- 45) Plaintiff was advised in his Grievance that Defendant Jane Doe Healthcare Unit Scheduler failed to Reschedule the plaintiff to be seen again by Nurse Practitioner Ceane.
- 46) Plaintiff has suffered and continues to suffer from permanent damage to his ankle.
- 47) Defendant John Doe (Correctional Officer) knowingly and willingly violated the plaintiff's 8th Amendment to be free from cruel & unusual punishment.

- 48) Defendant John Doe knowingly and willingly prevented the plaintiff from getting medical attention. Which is deliberate Indifference to Serious Medical needs.
- 49) Defendant John Doe was the gallery officer assigned to the plaintiff's gallery, and therefore is responsible for the Sanitation and Security of his gallery. Defendant knowingly and willingly violated the plaintiff's 8th amendment. Conditions of confinement.
- 50) Defendant John Doe #2 was assigned as the Sanitation officer of the East cell house.
- 51) Defendant John Doe #2 knowingly and willingly violated the plaintiff's 8th amendment to be free from cruel & Unusual punishment. Conditions of confinement.
- 52) Defendant John Doe #2 was made aware of the bug and Rodent infestation in the East cell house but failed to act and intervene. Which is a violation of the 8th amendment.
- 53) Defendant John Doe #2 inactions and failure to intervene caused the plaintiff to be injured and have permanent damage.
- 54) Defendant Nurse Nicole knowingly and willingly violated the plaintiff's 8th amendment.
- 55) Defendant Nurse Nicole failed to provide plaintiff with adequate medical attention. Which is deliberate Indifference to Serious Medical needs.
- 56) Defendant Nurse only acted once she was given an order by Security Supervisor.
- 57) Defendant N.P. Holdenhouse knowingly and willingly violated the plaintiff's 8th amendment by failing to give the plaintiff adequate medical attention.

- 58) Defendant Holdenauer Assessed the plaintiff on numerous occasions but failed to adequately treat the plaintiff.
- 59) Plaintiff was in constant pain and couldn't walk but the defendant continued to ignore the plaintiff.
- 60) Defendant Holdenauer knowingly and willingly gave the plaintiff inadequate medical treatment. Which is a violation of the plaintiff's 8th Amendment. Free from Cruel & Unusual Punishment.
- 61) Defendant W.P. Crane knowingly and willingly violated the plaintiff's 8th Amendment right.
- 62) Defendant W.P. Crane Refused to treat the plaintiff. Refused to give the plaintiff adequate medical attention. Which is a violation of the plaintiff's 8th Amendment. Deliberate Indifference to Serious Medical Needs.
- 63) Defendant Jane Doe (H.C.U. Schedule) knowingly and willingly violated the plaintiff's 8th Amendment.
- 64) Defendant Jane Doe Failed to Reschedule the plaintiff which caused a delay in the treatment of the plaintiff.
- 65) Defendant Jane Doe Actions contributed to the plaintiff's pain and suffering. Which is a violation of the plaintiff's 8th Amendment right.

Each defendant is being Sued in their Individual Capacity.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Plaintiff is seeking \$15,000 a piece from each defendant in punitive damages. And \$12,000 a piece from each defendant in compensatory damages

VI. The plaintiff demands that the case be tried by a jury. ☒ YES ☐ NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

✓ Signed this 27th day of November, 2024

✓ [Signature]
(Signature of plaintiff or plaintiffs)

✓ Jordan Bailey
(Print name)

✓ 431943
(I.D. Number)

Menard Correctional Center
700 Kaskaskia Road, P.O. Box 1000
Menard, IL 62259
(Address)

UNITED STATES DISTRICT COURT
~~SOUTHERN~~ DISTRICT OF ILLINOIS
 Southern

Jordan Bailey
 (full name of plaintiff or petitioner)

vs.

Nurse Crane et al
 (full name of defendant(s) or respondent(s))

APPLICATION TO PROCEED
 WITHOUT PREPAYING FEES OR
 COSTS / FINANCIAL AFFIDAVIT
 (PRISONER CASES)

Case number: 24-2552-SMY

Instructions: Please answer every question. Do not leave blanks.
 If the answer is "0" or "none," say so.

If you are in custody, you are subject to the Prison Litigation Reform Act ("PLRA"). The PLRA requires all pretrial detainees and prisoners to pay the filing fee. If you cannot pay the full filing fee at this time, you may seek leave to proceed *in forma pauperis*. A pretrial detainee or prisoner who proceeds *in forma pauperis* pays the full filing fee over time, with monthly installments taken from his or her trust fund account.

Application: I am the plaintiff / petitioner in this case. I believe that I am entitled to the relief I am requesting in this case. I am providing the following information under penalty of perjury in support of my request (check all that apply):

☒ to proceed *in forma pauperis* (IFP) (without prepaying fees or costs)
☐ to request an attorney

1. Are you in custody? ☒ Yes ☐ No

ID # 431943

Name of jail or prison: Hennepin C.C.

Do you receive any payment from this institution? ☒ Yes ☐ No

If "Yes," how much per month? \$ 13.00

2. Other sources of income / money: For the past 12 months, list the amount of money that you have received from any of the following sources:

(list the 12-month total for each)

Self-employment, business, or profession:

\$ 0

Income from interest or dividends:

\$ 0

Income from rent payments:

\$ 0

Pensions, annuities, or life insurance:

\$ 0

Disability or worker's compensation:

\$ 0

Gifts:

\$ Requested A Trust fund attached

Deposits by others into your jail or prison account:

\$ 0

Unemployment, public assistance, or welfare:

\$ 0

Settlements or judgments:

\$ 0

Any other source of money:

\$ 0

3. Cash and bank accounts: Do you have any money in cash or in a checking or savings account? ☐ Yes ☒ No If yes, how much? _____
4. Other assets: Do you have an interest in any real estate (including your home), stocks, bonds, other securities, retirement plans, automobiles, jewelry, or other valuable property (not including ordinary household furnishings and clothing)? ☐ Yes ☒ No

If yes, list each item of property and state its approximate value:

5. Dependents: Is anyone dependent on you for support? ☐ Yes ☒ No

If yes, please list their names (for minor children, use only initials), relationship to you; and how much you and/or your spouse contribute toward their support each month:

6. Debts and financial obligations: List any amounts you owe to others.
- _____
- _____

Declaration: I declare under penalty of perjury that all of the information listed above is true and correct. I understand that a false statement may result in dismissal of my claims or other sanctions.

Date:

11-27-24

Jordan Bailey 431943
Applicant's signature
Jordan Bailey
Printed name

NOTICE TO PRISONERS: In addition to the Certificate below, you must attach a print-out from the institution(s) where you have been in custody during the last twelve months showing all receipts, expenditures and balances in your prison or jail trust fund accounts during that period. Because the law requires information as to such accounts covering a full twelve months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account - prepared by each institution where you have been in custody during that twelve-month period. You must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE (Incarcerated applicants only)
(To be completed by the institution of incarceration)

I certify that the applicant named above, _____, ID # _____, has the sum of \$ _____ on account to his/her credit at _____ (name of institution). I also certify that during the past twelve months, the applicant's average monthly deposit was \$ _____. (Add all deposits from all sources and then divide by the number of months.)

Date: _____

Signature of authorized officer

Printed name

CERTIFICATE

TO BE COMPLETED FOR PRISONERS ONLY. THIS IS A STATEMENT BY THE PRISON
AND NOT THE PRISONER

I hereby certify that the plaintiff or petitioner in this action has
the sum of \$ _____ in his trust fund account
at this correctional center where he is confined.

I further certify that the plaintiff or petitioner has the following
securities to his credit according to the records of this institution:

Authorized officer

Institution

Title

Date

IMPORTANT:

THIS CERTIFICATE MUST BE ACCOMPANIED BY A COPY OF A SIX MONTH LEDGER
OF THE PLAINTIFF'S TRUST FUND ACCOUNT.